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MILLER, MATONE NORTH F. SUITE 2350	I S a t	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first/class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885 on the date indicated below.					
CHICAGO, IL 6	60606		ſ	Thomas		1/1 e/t//	(Depositor's name)
				1,14000	83 /	179.0	(Signature)
				October	20/	2/009 /	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTO	RNEY POCKET NO.	CONFIRMATION NO.
10/595,668 05/03/2006		·	Chantal Cordier			28944/50037	4382
TITLE OF INVENTION	OPTICAL IMAGING	DEVICE SUITABLE FO	OR FORMING IMAGES	OF FINGERPRIN	ITS		
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU		SUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	<b>\$</b> 0		\$1810	12/30/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS				
LAPAGE, MICHAEL P		2886	356-071000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Miller,							,
☐ Change of corresponded Address form PTO/SB	ondence address (or Cha 3/122) attached.	nge of Correspondence	or agents OR, altern	atively,		.Matthi	as &
"Fee Address" indi PTO/SB/47; Rev 03-0 Number is required.	registered attorney of 2 registered patent a	the name of a single firm (having as a member a tered attorney or agent) and the names of up to istered patent attorneys or agents. If no name is a Hull  3 Hull					
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PLEASE NOTE: Unle recordation as set forth	ess an assignee is identi in 37 CFR 3.11. Comm	ified below, no assignee oletion of this form is NC	data will appear on the	patent. If an assi	gnee is id	lentified below, the do	ocument has been filed for
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Typed or printed name Thomas A. Miller Registration No. 40,091							
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